PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I							S	MALL E	NTITY		OTHE	RTHAN	
TOTAL CLAIMS			(Colu	(Column 1)		(Column 2)		TYPE		OF		SMALL ENTITY	
				·	30			RATE	FEE		RATE	FEE	
FOR				R FILED	NUM	BER EXTRA		BASIC FEE	355.0	⁰ OF	BASIC FE	710.00	
╟╴	OTAL CHARGI	r	minus 20=		•		X\$ 9=		OF	X\$18=			
-	IDEPENDENT			minus 3 =				X40=		OR	X80=		
L	OLTIPLE DEPE	ENDENT CLAIM	PRESENT	· ~				+135=		OR	<u> </u>		
• 1	If the difference	e in column 1	s less than	ess than zero, enter "0" in colu			L	TOTAL		OR	L		
		CLAIMS AS	AMENDE	ENDED - PART II					L	 '		THAN	
_		(Column 1)		(Column 2) (Column 3)				SMALL	ENTITY	OR			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	F. i ili	HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent FIRST PRES	ENTATION OF N	Minus	PENDENT	CLAIM	=		X40=		OR	X80=		
	150.0	1	OEM CE DI	-r ENDENT	CLAIN			+135̇=		OR:	+270=		
							ι	TOTAL DIT. FEE	· · · · · · · · · · · · · · · · · · ·	OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)										-	NODEL 1 EE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=	 	<40=		i i	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT (CLAIM		<u> </u>			OR	7002		
	:	•					+	135=		OR	+270=		
							ADD	TOTAL IT. FEE		OR A	TOTAL DDIT. FEE		
- 1		(Column 1) CLAIMS	(Physiological Property of the Control of the Contr	(Column		Column 3)							
A IMICIA		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA	R	ATE T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	-	=	X	\$ 9=		OR	X\$18=		
	Independent	•	Minus .	***	i	=	X	40=		F	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700=		
: If:	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								(OR	+270=		
···¦										OR A	TOTAL DDIT. FEE		
Tł	ne "Highest Numb	per Previously Paid	for" (Total or	Independent) is the hi	ghest number fo	ound in	the approp	oriate box	in colur	nn 1.		